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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\*** *one*  
 This appln claims benefit of 60/268,273 02/14/2001 *OK*

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*** *none*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**  
**\*\* 02/12/2002**

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>me</i> Examiner's Signature _____ Initials _____	STATE OR COUNTRY FRANCE	SHEETS DRAWING 0	TOTAL CLAIMS 71	INDEPENDENT CLAIMS 10
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**ADDRESS**  
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 275 Industrial Parkway  
 Chardon, OH  
 44024

**TITLE**  
 Particulate metal alloy coating for providing corrosion protection

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
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